PUBLICDISCLOS	URE COMMISSION
	711 CAPITOL WAY RM 20
	PO BOX 40908
	OLYMPIA WA 98504-0908
	(360) 753-1111
	TOLL FREE 1-877-601-292

THIS SPACE FOR OFFICE USE

OATE FILED PDC

	(360) 753-1111 TOLL FREE 1-877-601-2929	LODDIIOI	(LOIOTTONION	(12/14)	OCT 2 0 2016	
1. Lobbyist Name						
Christophersen	ı Inc					
Permanent Business Address				Business Telephone Numbers		
PO Box 9157/ 819 Virginia St, Unit 1810 98101				Permanent	(360) 485-2026	
				Temporary ()		
City		State Zip		Cell Phone ()		
Seattle		WA	98019	or Pager		
Temporary Thurston County address during legislative session				E-Mail Addre	2\$\$	
				Vicki@cl	hristopherseninc.com	
Employer's name and address (person or group for which you lobby)				Employer's occupation, business or description of purpose of organization		
Celgene Corporation				-		
86 Morris Av Summit, NJ 0		ı		global b	oiopharmaceutical	
4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate				E-Mail Addr		
lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report.) Sedrick Spencer			-3 report.)	Sspend	cer@celgene.com	
Courier ope			,			
* * -	(compensation) for lobbying?		Description of employment (check one	or more boxes	3)	
\$200	Channel date around the second		T T		Sole duty is lobbying	
		☐ Part time or temporary employee ☐ Lobbying is only a part ☐ Contractor, retainer or similar agreement of other duties				
			☐ Unsalaried officer or member of g	roup		
			Does employer pay any of your lobbying If yes, explain which ones.	ng expenses di	rectly?	
Yes: \$ per		• • •				
_	m not reimbursed for expenses.					
7. How long do you	expect to lobby for this organization?			•		
☐ Permanent1		ring legislative session	☑ Other, Explain: Terr			
associations, or orga		g the name and address of e	ehalf of its members or a representative each member or funder who has paid fee		obies on behalf of businesses, groups, r payments over \$1,450 during either of	
⊠ No		no member or funder has pa	id, pays, or is expected to pay over \$1,4	50.		
	st is of parties attached over have a connected, related or close	ly affiliated political action co	ommittee which will provide funds for you	i to make politic	cal contributions including purchase ticke	
to fund raising events	s? If so, list the name of that political a	ction committee.		pone	bearing bearing	
□ No	of the committee is: Celgene PA	C				
	ompany, partnership or similar business		to perform actual lobbying duties, list n	ame of each pe	rson who will lobby. (See WAC 390-20-	
Vicki Christ	tophersen					
	t. Lobbying is most frequent before leg neemed with following subjects:	islative committee members	Remarks:			
CODE SUBJE		SUBJECT				
	ss and consumer affairs 10 🔲	Higher education				
03 Constitution Co		Labor				
05 Energy	and utilities 13 🔲	Law and justice				
resou	rces - parks 15 🔲	State government				
insura	ance 17 🛄	Technology Transportation				
08 Fiscal	18 🗆	Other - Specify:				
CERTIFICATION: I hereby certify that the above is a true, complete and correct statement.			EMPLOYER'S AUTHORIZATION: Confiregistration statement.	EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described in this registration statement.		

12. COSBMISTS SIGNATURE

DATE

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE

DATE

9/15/16

9/15/16

P/15/16

DATE

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE

DATE

9/15/16